BEST AVAILABLE COPY

PATENT ADDITION SEE DETERMINATION DECORD													inei		
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									09808844						
CLAIMS AS FILED - PART I								SMALL ENTITY OTHER THAN							
(Column 1) (Column 2)								TYPE			OR	SMALL			
TC	TAL CLAIMS	••.	76					RATE		FEE		RATE	FEE		
FÒR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			26 - minus 20=		· C			X\$ 9=			OR	X\$18=	105		
IND	EPENDENT CL	AIMS	2 _ minus 3 =		* Ø			X40=		-	OR	X80=			
MULTIPLE DEPENDENT CLAIM PRESENT								+135=			OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	Į.	TOTA	_		OR OR	TOTAL	818		
CLAIMS AS AMENDED - PART II								. =	- 1		1 ~	OTHER			
(Column 1) (Column						(Column 3)	•	SMAL	L E	NTITY	OR	SMALL			
AMENDMENT A	, ,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	*	Minus	**	-	=		X\$ 9=	•		OR	X\$18=			
<b>AME</b>	Independent	*	Minus	***		-		X40=			OR	X80=			
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	'ENDEN'	CLAIM		<b>!</b>	+135=	_		OR	+270=			
								TOT ADDIT. FI	AL			TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)									E E	<u> </u>		AUDII. FEE	1 11 21 11 11 11 11 11		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	] [	X\$ 9=	=		OR	X\$18=			
	Independent	*	Minus	***	T 01 4 11 1	=	┧╏	X40=			OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┙╽	+135=	<u> </u>		OR	+270=			
									ĀL		OR	TOTAL			
(Column 1) (Column 2) (Column 3)								ADDIT. F	ᄩ			ADDIT. FEE			
AMENDMENT C	Q	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA	֓֟֟֓֟֓֟֟֟֓֟֟֟֓֟֟֓֟֟֟֓֟֟֓֟֟֟֓֟֟֓֟֟֓֓֟֟֓	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
N Q	Total	*	Minus	**		=	╽╽	X\$ 9=	=		OR	X\$18=			
ME	Independent	*	Minus	***		=	┧╽	X40=	_		OR	X80=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										1	<b></b>	<del> </del>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270= TOTAL			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE															
1	The "Highest Nur	nber Previously Pa	aid For" (Total o	or Independ	dent) is th	e nighest numb	per fou	und in the	ap	propriate bo	x in co	olumn 1.			